

Indiana State Police Clandestine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 05-21-2014

Street: 1021 South 19th Street

Incident #: 14ispc004234

Apt, Lot, Room #:

County: Henry-33

City: New Castle, Indiana 47362

Type of Laboratory Seizure (check one)

- ☒ Lab Seizure
☐ Chemical Seizure
☐ Equipment Seizure
☐ Dumpsite Seizure

Seizure Location (check all that apply)

- ☐ Residence ☐ Hotel/Motel
☐ Outbuilding ☐ Open – No Structure
☒ Vehicle ☐ Business
☐ Other: _____

Apt., hotel, multi-family dwelling: Shared HVAC: ☐ Yes ☐ No ☐ Unknown

Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply)

- ☐ One Pot or Birch Reaction(s): _____
☐ Red Phosphorous/Iodine Reaction(s): _____
☒ Hydrochloric Acid Gas Generator(s): car
☒ Flammable Solvents: shed
☐ Water Reactive Metal (Lithium): _____
☐ Anhydrous Ammonia: _____
☒ Corrosive Acid: car
☒ Corrosive Base: car
☒ Ammonium Nitrate/Sulfate: car
☐ Other (item and location): _____

Child under age 18 discovered (check appropriate)

- ☐ Yes _____ (number present)
☒ No
☐ Children not present but evidence they reside or visit often

Living conditions of home: ☒ clean ☐ disarray
☐ unclean
Estimated length of time manufacturing had been occurring: _____
Additional Information: _____

Vehicle, Travel Trailer, RV or Watercraft Information:

Owner: Rhett Bales Make: Volvo
VIN: YV1SW61R012112594 Model: pc
Year: 2001 Color: black

This report has been faxed* or emailed to the following agencies that serve the location:

Fire Department: New Castle Fax: email
Health Department County: Henry Fax: email
Department of Child Services Hotline: dcshotlinereports@dc.in.gov Fax: 317-234-7595 or 317-234-7596

For further information regarding this methamphetamine laboratory, contact

Investigating Officer: Rusty Slater 7717 Phone 765-778-2121

*This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services listed within 24 hours of scene processing.